

Ministry of Social Development
Investing in Services for Outcomes

Community Investment Strategy

June 2015



Foreword

The *Community Investment Strategy* sets out how the Ministry of Social Development will purchase social services for vulnerable New Zealanders over the next three years.

MSD purchases around \$600 million of services each year. Of that, around \$330 million supports our most vulnerable communities including children, young people and adults through community-based organisations. We want our investment to make the biggest difference where it is needed, and to do that, we need to change the way we manage that investment.

Last year we worked with the Minister's NGO Advisory Group to plan how we can most effectively invest in social services. This resulting *Community Investment Strategy* provides a medium-term view of our direction and sets out the priorities for investment within a Results Measurement Framework.

Importantly, the *Community Investment Strategy* includes the rationale and evidence behind decisions, as well as a work programme to improve the reliability of our decision-making over time. Our aim is to better align funding for the most vulnerable New Zealanders to the right social services, and for providers to achieve results that meet these needs, with evidence about what works.

A key focus of the *Community Investment Strategy* is the partnership we have with providers and communities to deliver the best possible results. I hope to see some good progress in coming months as we strengthen our working relationships with providers and communities and agree performance measures for priority areas.

The Ministry will also work more closely with other government agencies, such as Health, Education, Justice and Corrections, where they are purchasing similar services or aim to achieve similar results for vulnerable people.

This is a 'living strategy'. We will implement an annual review process to check we are on track and to reconfirm our direction. We are committed to working flexibly and alongside providers to support their capability development and to identify local community needs as we work through this process.

Through this new approach I have every confidence that we will see improved results for vulnerable New Zealanders.



Murray Edridge
Deputy Chief Executive, Community Investment
Ministry of Social Development

Contents

The Community Investment Strategy is presented in two parts. Part One sets out the strategic direction for social service purchasing over the next three years, including how the Ministry of Social Development (MSD) will work with providers to achieve results in the future. Part Two discusses MSD’s future direction of funding for vulnerable children, young people and adults.

Part one: Strategic direction	4
1.1 Introduction	4
1.2 Strategic Investment Framework	5
1.3 Community Investment Strategy	7
Part two: Implementing the strategy	12
2.1 Introduction	12
2.2 Results Measurement Framework	12
2.3 2014/15 Funding Summary and Future High-Level Funding Direction	14

Part one: Strategic direction

1.1 Introduction

1. The Ministry of Social Development works with some of the most vulnerable people in New Zealand. In addition to providing services directly, we purchase around \$600 million of services from non-government providers each year to support people in our communities. This includes over \$300 million in services to support the most vulnerable or at-risk children, young people and adults, with the balance invested by MSD to support people into employment¹.
2. The Community Investment Strategy focuses on funding for those most vulnerable in our communities. It also signals a renewed focus on evaluating service effectiveness to help providers and ourselves understand what works to make a difference in people's lives. We want to be able to demonstrate that things are getting better for individuals, families, whānau and communities because of the services being delivered.
3. MSD is committed to working differently. In late 2014 we established Community Investment², a business unit that leads our investment in communities by purchasing social services to support vulnerable children, young people and adults. Providers have deep knowledge of and links into communities, which we rely on to reach the vulnerable people and families/whānau who need the most support. The Community Investment Strategy will guide MSD's partnership with the community sector as we work to make purchased social services more cohesive and more results-focused.
4. The Community Investment Strategy applies to all social services purchased by Community Investment³ and the Ministry of Youth Development, but does not apply to services purchased for Work and Income.

1. The Ministry provides employment services through Work and Income.

2. Community Investment was established on 1 October 2014 and is a merger of Family and Community Services and the Community Engagement team from Child, Youth and Family.

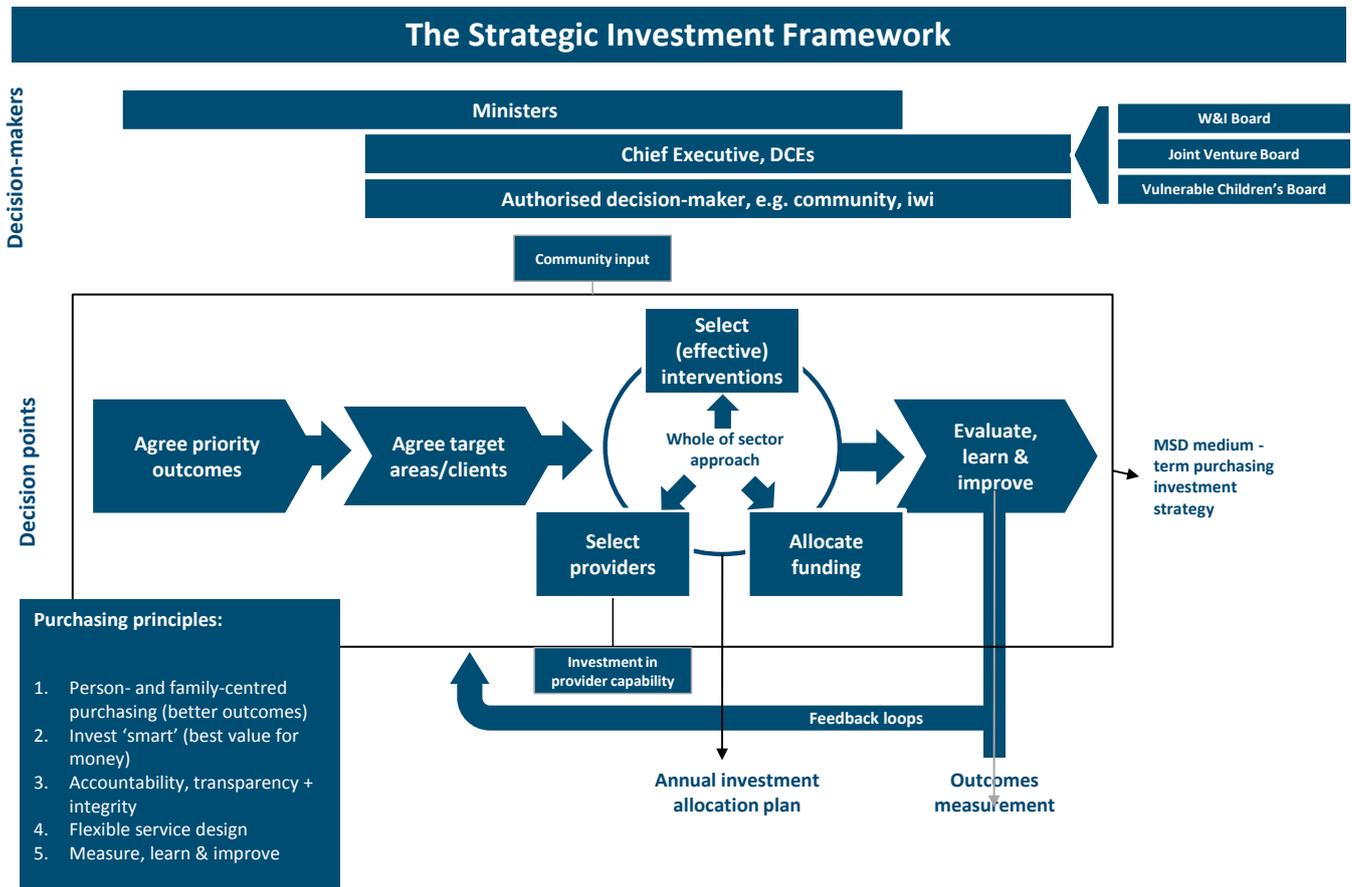
3. Including services purchased for Child, Youth and Family.

1.2 Strategic Investment Framework

MSD’s Strategic Investment Framework is an MSD-wide approach to better purchasing decisions and our working relationship with providers and communities

- Our Strategic Investment Framework sets out the way we will work with providers in the future. It is designed as a system to help decision-makers invest in the highest priority areas, make trade-offs where necessary and support innovation. It includes a collaborative approach to inform our decisions about service purchasing, which will help ensure effective services reach the right people.

Diagram one: MSD’s Strategic Investment Framework



- In the past, conversations between MSD and providers have too often been about narrow contractual outputs rather than the broader social goals being sought. That will change. Working together towards agreed results will better reflect the strengths of providers.

7. MSD’s Strategic Investment Framework includes a set of principles that are guiding our investment decisions:
 - **Person-centred and family-focused purchasing:** Working with individuals, families, whānau and communities to better understand their needs and how to improve results.
 - **Smart investment:** We’ll consider how funding decisions impact on providers (for example, the need to maintain appropriate capability in communities).
 - **Accountability, transparency and integrity:** We will be up-front about the priority results we are working towards and these will guide our purchasing decisions.
 - **Flexible and responsive service design:** Adopting a results focus will give service providers more room to innovate in achieving those results.
 - **Measure, learn and improve:** Evidence collected from providers and communities will inform future contracting decisions.

8. Where the application of the Strategic Investment Framework points to the need for changes to funding, we will ensure that:
 - we signal changes in advance
 - we consider the impact for individual providers, communities and the sector, as a whole, before funding changes are made
 - transition arrangements are considered
 - engagement and communications are timely and fit for purpose.

9. Many of the people receiving purchased services are Māori or Pacific. Purchased social services must respond to the strengths and interests of Māori, whānau, hapū, iwi and Pacific families and communities. We will continue to engage with Māori and Pacific stakeholders to ensure that our new way of working and any changes to the way services are funded are effective for the Māori and Pacific people who need our support.

1.3 Community Investment Strategy

The Community Investment Strategy explains the steps we will take to ensure the services we buy for vulnerable New Zealanders deliver better results

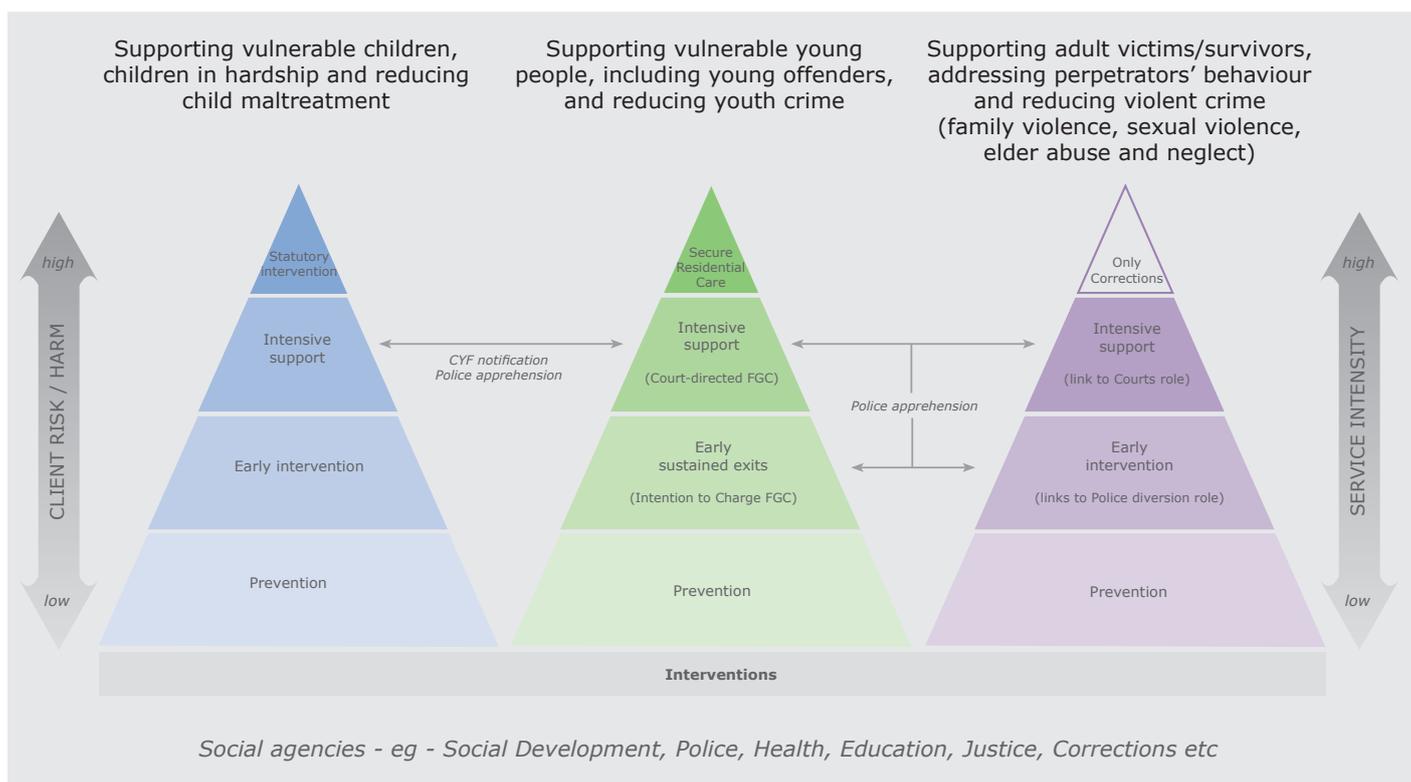
10. Through the Investing in Services for Outcomes work programme we've been improving every aspect of our approach to social service purchasing. The Community Investment Strategy will carry forward six key elements of that work, which are discussed further in this section:
 - focusing more clearly on priority results
 - building the evidence base for effective services
 - improving the quality of data collection
 - setting out a clear direction for future funding
 - further simplifying compliance requirements
 - continuing to build provider capability.
11. We will know the Community Investment Strategy is working when MSD and providers are striving towards clear, consistent and well-understood priority results for individuals, families, whānau and communities. The best and most important measure of success will be improved results over time for vulnerable people in priority areas such as child maltreatment, youth offending and family violence.

Focusing more clearly on priority results

12. Over the next three years, MSD will maximise the impact of our resources to ensure that our purchasing is targeted towards the most effective services and focused more clearly on achieving results. We intend that by:
 - December 2016: all funding will be aligned to Community Investment Strategy priorities
 - December 2017: unnecessary duplication will be removed (including considering duplication and alignment with services purchased by other Government agencies)
 - June 2018: all contracts will have results measures.
13. To ensure providers are clear about our priority results and how we will measure progress towards achieving them, we have developed a Results Measurement Framework. It details the expected results and performance measures we are seeking in the three priority result areas:
 - supporting vulnerable children and children in hardship and reducing maltreatment
 - supporting vulnerable young people, including youth offenders, and reducing youth crime
 - supporting adult victims/survivors, addressing perpetrators' behaviour, and reducing violent crime.

14. The three priority result areas are summarised in the diagram below and described in more detail in Part Two.

Diagram two: Priority result areas by intensity of services and risk



15. These priority result areas have a direct line of sight to the Government’s Better Public Service targets⁴. They integrate major policies, such as the Children’s Action Plan and the Youth Crime Action Plan, as well as emerging work on family violence and sexual violence, particularly as articulated in the Family Violence and Sexual Violence Ministerial Work Programme.

Building the evidence base for effective services

- 16. MSD will invest in services that are known to be effective – that is, services that can demonstrate their success at contributing towards agreed results. We recognise, however, that gauging effectiveness is not easy because services address complex social issues that play out over long periods of time and sometimes across generations.
- 17. Many different types of evidence, in addition to on-the-ground results, can help to determine whether a service is effective. Evidence can range from the published results of an evaluation of a specific programme to international experience, literature and the knowledge of expert community-based practitioners and academics.

4. <http://www.ssc.govt.nz/better-public-services>

18. Evidence is useful for decision-making when it helps to establish a clear link between needs and services. Then we can match the needs of vulnerable people to the appropriate service at the right time to achieve the right results. We will encourage providers to explain what they are trying to achieve and how, drawing on available evidence of effectiveness.
19. To do this, we will provide evaluation guidance for providers to ensure purchased services are consistently evaluated using best practice and an appropriate level of evidence.
20. MSD will also work with providers and the Social Policy and Evaluation Research Unit (Superu; formerly the Families Commission) to build evidence of effectiveness from the services we fund.
21. With support from Superu, we have developed a multi-year evidence and evaluation schedule of our key programmes and services. As our knowledge about effectiveness grows and we develop a deeper understanding of needs and risks in communities, our annual purchasing plans will become increasingly targeted and specific.
22. Superu is piloting an Evaluation Fund with providers to support the evaluation of services. This fund will focus on services that offer opportunities for transferable learning that can benefit the social service sector as a whole.
23. Every year, we will publish an annual update of the Community Investment Strategy. This will give guidance to providers on what we have learnt about evidence-based, effective services and allow us to make decisions about continuing to purchase the most effective services.

Improving the quality of data collection

24. To support purchasing for results and results-based contracts, MSD needs to improve the way it collects information about the people receiving our services. Improving the quality and consistency of data collected will help us to better understand clients' needs and the results they want to achieve. It will also assist us to measure the effectiveness of services over time. As we work on this, we will always be mindful of clients' privacy rights and we'll be careful not to impose non-essential work on providers.
25. To achieve this, we are collecting population-level demographic data from a variety of statistical sources. We want to have a clearer understanding of the needs and trends of the people who are currently receiving our services or may need them in the future. We also want to make sure that the mix of the services we purchase is targeted to most effectively meet this demand.

26. This population-level information will be complemented with the collection of information from providers with the Results Measurement Framework, which sets the bar for purchased services to achieve and report on the results we are seeking. Through the collection of consistent measures and better data, we will be able to more accurately report to our stakeholders on the progress we are making towards achieving our results.
27. We aim to refine the reporting expectations on providers as we implement results-based performance measures. Providers can expect we will seek information that is meaningful to MSD and that will contribute towards achieving our results.
28. All of this work will be gradual, as it will have implications for MSD's information collection systems generally. To aggregate all of this data, we intend to develop information technology infrastructure aimed at better data collection.

Setting out a clear direction for future funding

29. Communities expect MSD funding to have local accountability and rigour and that purchased services are relevant to the needs of that community.
30. In Part Two, we have summarised the future direction of social service purchasing for three priority result areas and for the other areas funded by MSD's Community Investment group. These decisions are based on Government priorities and our current knowledge of service effectiveness.
31. We intend in future to have better informed decision-making as a result of the *Community Investment Strategy*. This will be developed in collaboration with communities through annual regional strategic planning processes.
32. Strategic planning processes will take into account developments in Government priorities; what we have learnt about effective and evidence-based services and better analysis of community level needs and priorities as a result of information gathered through the Results Measurement Framework and data analysis.

Further simplifying compliance requirements

33. MSD wants to help providers focus on delivering the best possible services for their communities. To enable this, we are working to reduce our compliance requirements by introducing:
 - a streamlined contracting approach by putting in place a single-MSD contract for providers with large multi-service contracts, one lead relationship manager and a joined-up provider management plan

- a cross-government contracting framework drawn from the Results Based Accountability methodology⁵, which includes a focus on results and measuring the things that make a difference rather than simply measuring activity
- streamlined monitoring and reporting by reducing duplication, improving information sharing and coordination, ensuring service continuity where possible and lining up the timing of provider visits across service lines
- a single MSD-approvals process for MSD providers and eventually one accreditation process across government
- better cross-agency systems and processes for social-sector purchasing.

Continuing to build provider capability

34. MSD supports providers to become stronger and more sustainable in a changing social sector in order to meet the needs of their communities. The \$31.65 million Capability Investment Resource Fund⁶ has been in place since 2012 and is being distributed over four years.
35. A recent evaluation of the fund tells us that this support is improving the ability of providers to achieve better client results. Our future support of providers will build on this success and will support the move towards purchasing for results.
36. We will work with providers to explain the *Community Investment Strategy* and how the move to results-measures contracts and evidence-based services will impact each organisation. We will provide training, tools and resources to support them with this.

5. <http://www.familyservices.govt.nz/working-with-us/funding-and-contracting/results-based-accountability/>

6. <https://www.msd.govt.nz/about-msd-and-our-work/work-programmes/investing-in-services-for-outcomes/capability-investment-resource.html>

Part two: Implementing the strategy

2.1 Introduction

This section of the *Community Investment Strategy* describes MSD’s planned future funding direction

37. Part two of the *Community Investment Strategy* is a comprehensive map of purchased social services.
38. First we describe the Results Measurement Framework. This has two layers – a top layer and a second layer. The top layer is attached in Appendix one.
39. The Funding Summary (section 2.3, page 14) describes the overall direction of funding for all areas.

2.2 Results Measurement Framework

40. MSD has developed a Results Measurement Framework to provide a direct line of sight between:
 - Better Public Service (BPS) targets and major Government policies such as the Children’s Action Plan
 - the results sought for vulnerable New Zealanders in three priority areas and at different levels of service intensity
 - the performance of providers and purchased services
 - actual results for clients.
41. The top layer of the Results Measurement Framework draws from factors known to protect vulnerable children, young people and adults from risk. It also provides the indicators of success, which is what we expect from providers to achieve Government priorities in the three priority result areas.
42. The second layer of the Results Measurement Framework is how MSD will identify which providers and services are operating most effectively, and are achieving results in the three priority result areas. MSD will implement this in a phased approach by introducing results-focused performance measures in provider contracts over the next three years.
43. The Results Measurement Framework reflects a Results Based Accountability framework to ensure we focus on the right results, measure the right things and are certain that our work is making a measurable difference in people’s lives. The Results Based Accountability framework is already used by MSD and many providers to drive continuous improvement. It shows the link between the results achieved with individuals, families/whānau and the wellbeing of the whole population.

We will link results for clients with population-level results to help us monitor service effectiveness

44. Focusing on purchased services and provider performance will ensure we can report against actual change to a client's wellbeing.
45. The Results Measurement Framework includes a consistent set of expectations that shows what skills, knowledge, attitudes, beliefs, behaviour or change in circumstances we expect for clients as a result of receiving a service or programme. This will enable MSD to track client results against population-level wellbeing.
46. The measurable population indicators will show over time how we contribute to changes in our communities, but they do not imply that the services we purchase will be held accountable for trends in these indicators.

We will focus on Government's priorities and targets

47. The *Community Investment Strategy* contributes to the following Government priorities.

Supporting vulnerable children and children in hardship and reducing maltreatment

48. MSD leads on the BPS target to support vulnerable children and specifically to reduce the number of assaults on children. The *White Paper for Vulnerable Children* and the *Children's Action Plan* set out the broad direction to protect vulnerable children, leading to the Vulnerable Children Act 2014, and the Vulnerable Children's Outcome Framework from which our results are derived.

Supporting vulnerable young people and reducing youth crime

49. MSD contributes to the Government's BPS targets to reduce youth crime and to increase the proportion of 18-year-olds with NCEA Level 2 or higher (or equivalent) by focusing both on vulnerable young people and those who offend.
50. The Vulnerable Children Act applies to young people up to 18 years⁷. *The Youth Crime Action Plan*, a 10-year plan to reduce crime by children and young people and help those who offend to turn their lives around, also frames the results MSD is seeking.

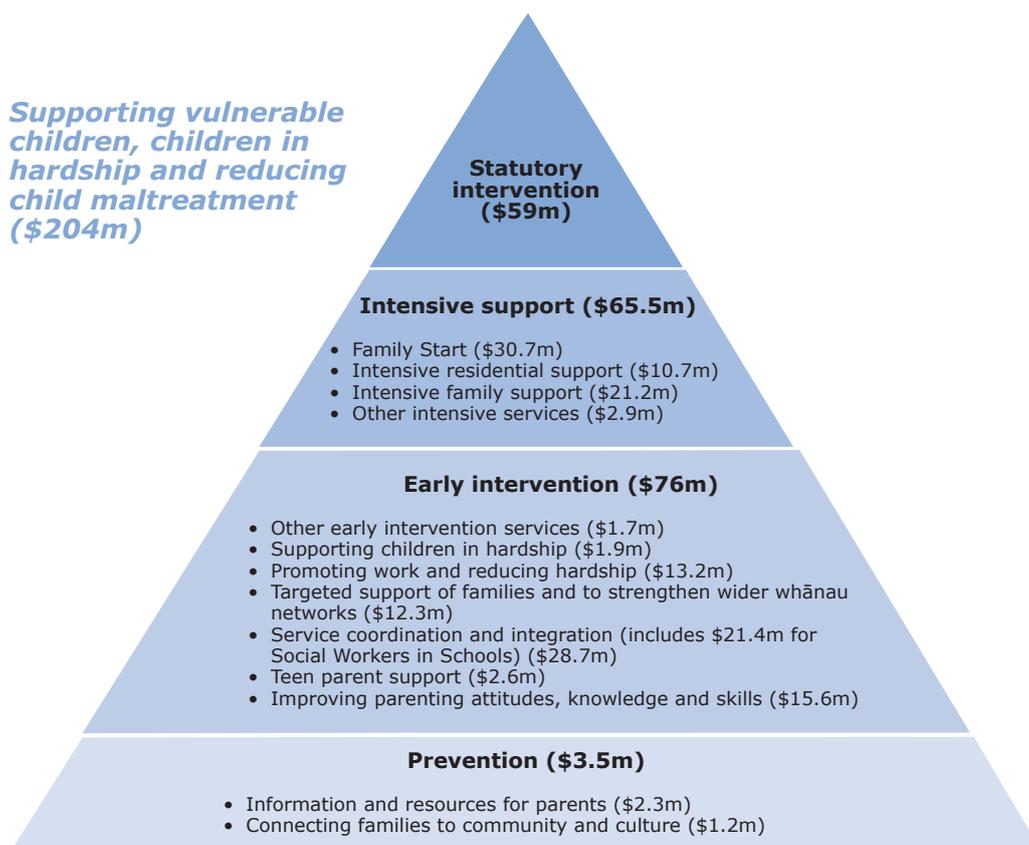
7. Ministry of Youth Development funding is targeted at young people aged from 12 to 24 years, drawing on a broader United Nations definition of young people.

Supporting adult victims/survivors, addressing perpetrators’ behaviour, and reducing violent crime

- 51. MSD contributes to the Government’s BPS targets for reducing violent crime and reoffending by focusing on family violence and sexual violence.
- 52. A whole-of-government work programme is underway that will inform funding investment decisions in the future. MSD is working closely across agencies to develop and deliver a coordinated approach to reduce family violence and achieve intergenerational change. There are significant linkages with the family violence work programme and the programme to address sexual violence, and these are now being brought together. Results sought under this work are still at a draft level, are prior to the alignment with sexual violence services and thus are subject to change in the future.

2.3 2014/15 Funding Summary and Future High-Level Funding Direction

Supporting vulnerable children and children in hardship, and reducing child maltreatment



53. Funding is currently allocated across statutory intervention (\$59 million); intensive support (\$65.5 million); early intervention, which will include emerging work to alleviate hardship for children by funding services for families with complex needs (\$76 million); and prevention (\$3.5 million).

Statutory services will be considered over the next year

54. The Minister's independent Child, Youth and Family Expert Advisory Panel will consider current issues in the care and protection system. The development of a new operating model for Child, Youth and Family is underway. This modernisation work is aligned with the *Community Investment Strategy*. Both have an emphasis on the effectiveness and results of our investments.
55. Significant shifts in purchased services to support Child, Youth and Family's role will not be considered until decisions are made on the new operating model. Any changes to these services will be made from 2016/17.

Intensive support, particularly through Children's Teams, is the priority

56. The *White Paper for Vulnerable Children* and the *Children's Action Plan* set out the broad direction to protect vulnerable children, which is reflected in the Vulnerable Children Act 2014.
57. At the heart of these reforms are Children's Teams, an interagency response targeted at children at risk of abuse or neglect who do not meet the criteria for Child, Youth and Family intervention. The ability of Children's Teams to accept referrals and get results for vulnerable children depends on having sufficient lead professionals and appropriate services.
58. The roll-out of Children's Teams is in its early stages, so we are adopting a transitional approach, supporting needs as they are identified. The immediate context will be the Children's Team in Hamilton; however, we are considering how support could be scaled nationally alongside the roll out of Children's Teams. As we do, we will work in close partnership with the Children's Action Plan Directorate local groups and other government agencies.
59. Family Start is currently the main intensive support programme funded. We are also looking at Social Workers in Schools (SWiS) and Strengthening Families as options from which to provide additional support for Children's Teams.
60. Alongside this, the Social Sector Board is working to support the development of a social sector investment approach, including the identification of priority populations. As this work progresses this will form part of our consideration.
61. Child, Youth and Family needs to focus more strongly on its core statutory role to ensure high-quality support to those most at risk. To achieve this, we require sufficient services to support children and families in need of intensive support but who don't require a statutory intervention.

62. This makes intensive support the priority area for investment. Over time, we will move resources to purchased services for high-risk children, young people and their families identified as needing a high-intensity service. These services include preventing children entering care and/or providing support to children in care who are returning home to their families, children transitioning from care to independence as adults, or children who are displaying harmful sexual behaviour.

Early intervention services are the focus of review

63. Superu has recently reviewed the evidence on parenting programmes, and we are now considering if changes should be made as a result. They concluded that there is little evidence that parenting programmes reduce child maltreatment, although they do influence parenting styles. There is also some evidence that interventions such as Incredible Years encourage positive child management strategies in parents of children with conduct disorder. Our work will consider how to ensure that well-evidenced and effective programmes are available to meet the needs of Children's Teams. This work will be done in consultation with other government agencies that fund similar services, such as the Ministries of Health, Education and Justice.
64. In 2015, MSD is leading a cross-agency programme of work to improve results for teen parents and their children, and those at risk of becoming teen parents. This includes the development of strategies and action plans to prevent unintended teen pregnancies and to better address the needs of teen parents and their children. It could involve some changes to services. The work is, in part, based on a review of MSD services for teen parents, which indicated there are gaps and overlaps in services for teen parents, and that better results could result from introducing a cross-agency, more personalised and targeted approach to service delivery.
65. MSD is reviewing service coordination mechanisms to gauge how responsive they are to local circumstances. For example, work is underway to assess how Strengthening Families fits into a landscape that now includes Children's Teams. Both services are responsible for coordinating services around vulnerable families and it is important to understand how they fit together, particularly in respect of the differences and similarities of their client groups.
66. The SWiS service is in the process of being evaluated as part of a wider policy and research programme on social supports in schools, which will include youth-focused services such as Multi Agency Social Services in Secondary Schools (MASSiSS) and Youth Workers in Secondary Schools (YWiSS).

Prevention services are unlikely to change significantly in the short term

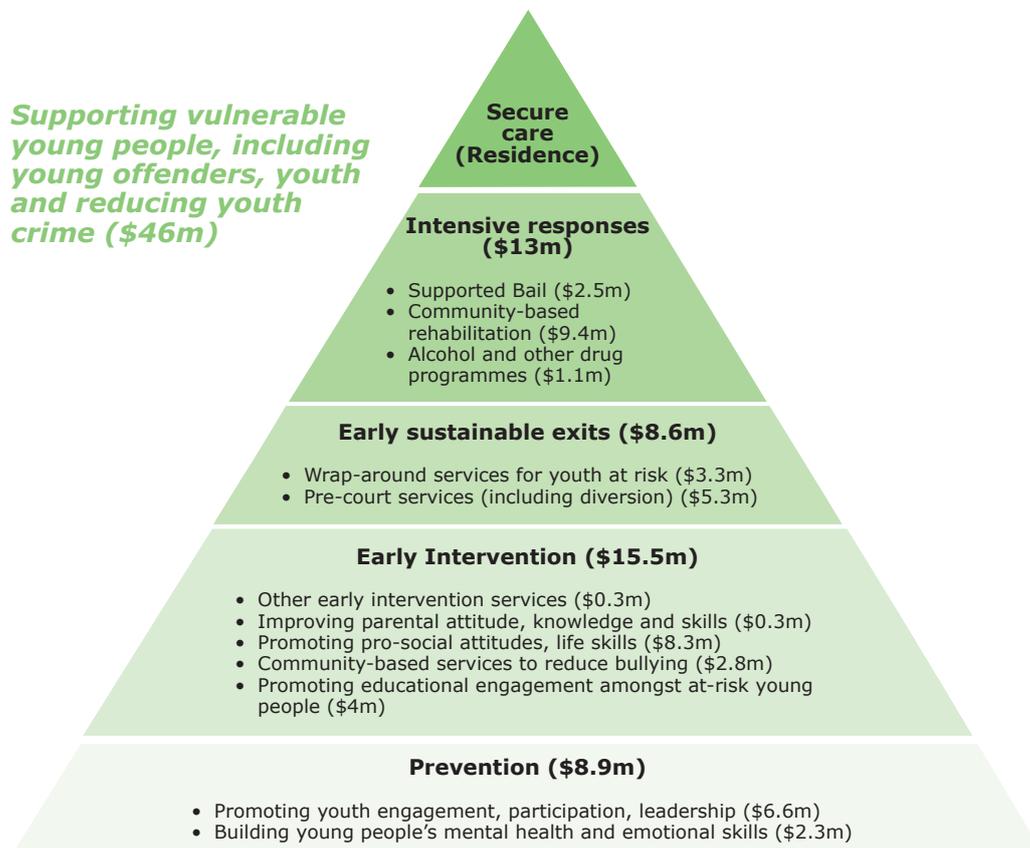
67. The main prevention programme, Strategies for Kids – Information for Parents (SKIP), focuses on behaviour change through building community support for parents and providing parenting information.

68. An initial evaluation focused on SKIP's relevance to MSD's goals and government objectives, and the coherence of its theory of change was completed in March 2015. It concluded that SKIP was highly relevant and found that its promotion of positive parenting and positive parenting environments across communities is integral to the government's prevention approach to child maltreatment. No significant changes to SKIP are proposed for 2015/16.

Supporting children in hardship is a continuing priority for Government

69. Over the past six years, the Government's primary approach for addressing child poverty and material hardship has been to promote social mobility, through paid employment driven by economic growth, clear work expectations and improved educational performance, while ensuring that New Zealand's social security safety net continues to support people who cannot support themselves.
70. Within the context of this broader approach, MSD funds a number of services from providers that address the wider causes and consequences of poverty and material hardship (for example, budget advice services), as well as some services that aim to directly reduce material deprivation itself (such as food in schools).
71. The Government has announced a continued focus on poverty and material hardship in its new parliamentary term. Over time, this focus may have an impact on the mix of services purchased by Government.

Supporting vulnerable young people, including young offenders, and reducing youth crime



72. Of the current \$46 million appropriated for vulnerable young people, \$13 million is spent on intensive responses; \$8.6 million on early sustainable exits (for those who have already offended); \$15.5 million on early intervention; and \$8.9 million on prevention.

73. The *Youth Crime Action Plan*, a ten-year plan to reduce crime by children and young people and help those who offend to turn their lives around, frames these services.

Priorities for investment

74. Key priorities include investment in:

- Ministry of Youth Development programmes that encourage young people to engage with and positively contribute to their communities, and help to address risk factors related to youth offending, educational underachievement, poor health and wellbeing.
- Ministry of Youth Development programmes that support young people to increase self-esteem, resilience and develop positive relationships with peers and adults.
- Ministry of Youth Development and Community Investment-funded programmes that support young people to engage in education.

- Investigating ways to intervene earlier (for example, in the pre-family group conference stage) for young people who offend.
 - Intensive community support services, rather than residential youth justice services.
75. MSD will work with other government agencies such as the Ministries of Health, Education and Justice to ensure that any programmes considered are aligned with any similar programmes funded by other agencies.
76. Social Sector Trials have delivered a wide range of changes in their communities, filling service gaps, improving the quality and inter-connectedness of social services, and taking steps towards more systemic changes in social service delivery. These activities have supported increased access to services for children and young people in particular, to support attendance at school, positive engagement in communities and participate in education, training and employment. Cabinet has agreed to extend the trials for another 12 months.

Emerging priorities for youth

77. The *Gangs Action Plan* is a cross-agency work programme aiming to address the intergenerational impacts of association with gang members. MSD is the lead agency for the principal social aspects of the plan, under the title *Start at Home Part 2*.

A review of several key services is needed to ensure that they are effective and achieve positive results for young people

78. There is the potential for additional monitoring and evaluation of:
- supports provided to schools through the Multi Agency Social Services in Secondary Schools and Youth Workers in Secondary Schools
 - the effectiveness of some of the Fresh Start programmes (for example, Supervision with Activity, Supported Bail⁸ and alcohol or drug residential services).
79. Some additional intensive response services will also be reviewed as part of modernising CYF, but this has not yet been determined. This may mean some potential for movement in intensive response services.

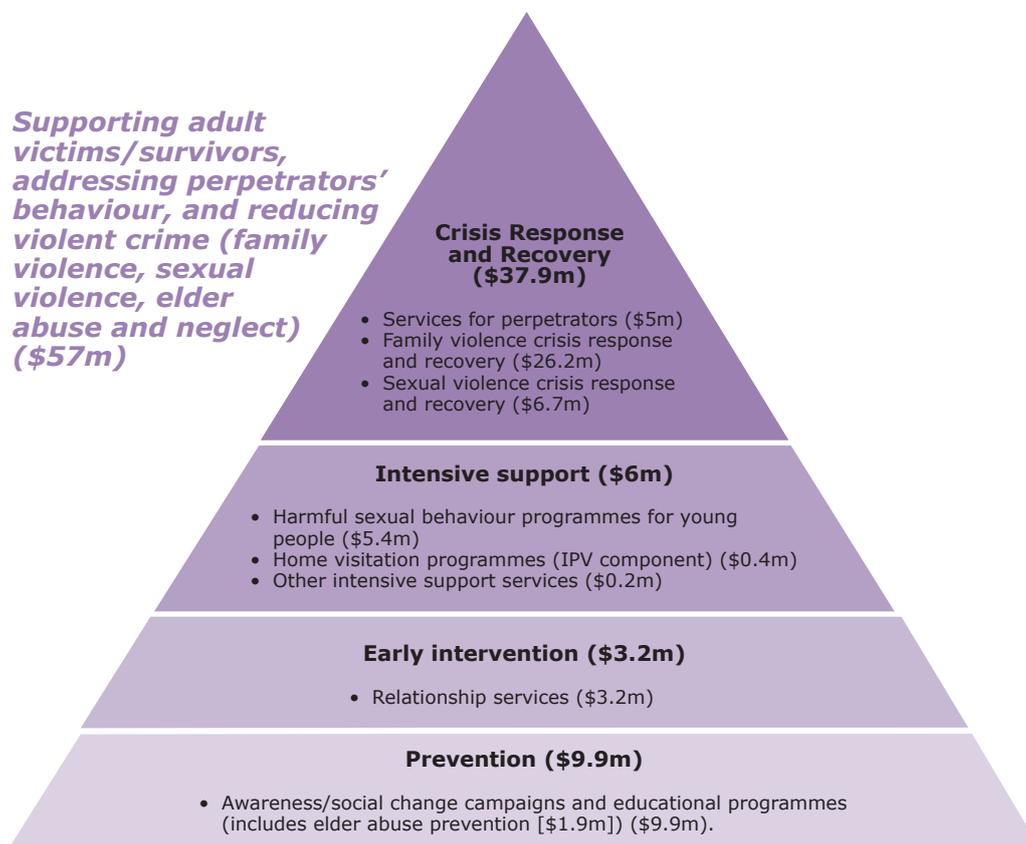
Prevention services are unlikely to change significantly in the short term

80. Evidence shows prevention services that develop social and emotional capabilities support the achievement of positive life outcomes. Approaches that focus on building foundational skills such as resilience, communication, decision-making, leadership and negotiation can have greater long-term impact than ones that solely focus on seeking to reduce the symptoms of poor outcomes for young people⁹.

8. As Supervision with Activity and Supported Bail are Court-ordered services, MSD can review the content and effectiveness, but cannot refuse to provide them.

9. The Young Foundation (2012). A Framework for outcomes for young people.

Supporting adult victims/survivors, addressing perpetrators' behaviour and reducing violent crime



81. MSD contributes to reducing violent crime and re-offending by funding services that:
- respond to crises, to support the recovery of victims/survivors and provide services for perpetrators (\$37.9 million)
 - deliver harmful sexual behaviour reduction programmes, home visits to families with an intimate partner violence component and other intensive services to young people (\$6 million)
 - deliver early intervention services, including relationship services (\$3.2 million)
 - build awareness of sexual violence and how to prevent it, as well as social change and education programmes to prevent family violence, and reduce elder abuse and neglect, which can occur in a range of settings including families (\$9.9 million).

No significant changes proposed to family violence or sexual violence funding while work is underway to develop an integrated strategic direction for these services

82. Government agencies are working together to align efforts to address family and sexual violence. Ministers have requested a whole-of-government investment-focused approach to addressing these issues, with the goal of preventing and responding to family violence more effectively. This will include a review of client needs and service provision.
83. MSD recognises that while sexual violence against adults or children can occur within the context of family violence, the nature, dynamics and impact of the violence are very different. Although there is a cross-over between family violence and sexual violence, because of the substantial differences between them, they will continue to be seen as distinct issues until the potential benefits and risks of a closer alignment between the two are assessed, particularly in terms of service delivery.
84. In addition, a Select Committee Inquiry is underway into the funding of specialist sexual violence social services. The Select Committee is expected to report back on its findings in the near future.

Support to other cross-cutting priorities (in particular, Whānau Ora) is under consideration

85. Whānau Ora supports whānau and families in need to determine what they need to improve their lives. Whānau Ora has a flexible and whānau or community-driven, approach to achieving results. Its model provides a strong opportunity to address multiple, cross-cutting, long-standing and complex needs.
86. We are looking at what is required to ensure Whānau Ora has adequate resource to meet its outcomes, as they align closely to the *Community Investment Strategy*.

Other MSD responsibilities and contributions

87. MSD funds a small number of other services. These 'other' services relate to Government priorities that are different in nature from those that have shaped the three main priorities. The additional services covered by the *Community Investment Strategy* include:
- participation and inclusion services for disabled people
 - counselling services in the context of the Canterbury recovery
 - social work services for refugees and migrants
 - supporting capability development of social service providers.
88. The majority of MSD-funded services that address participation and inclusion for disabled people are purchased for Work and Income. Therefore, only two disability-related services are included in the *Community Investment Strategy*. Both of these services are consistent with the Enabling Good Lives approach that is informing the development of services across the disability sector.

Appendix one: Results Measurement Framework (top layer)

What needs to happen to achieve the priority results	What we expect to see What Community Investment funded providers need to achieve	Information sources ¹⁰ National level outcome measures
Priority result area: Vulnerable children, children in hardship and reducing child maltreatment		
<p><i>Links with the Supporting Vulnerable Children BPS targets and the Children's Action Plan Vulnerable Children Outcomes Framework.</i></p>	<p>High-level indicators of success:</p> <ul style="list-style-type: none"> Reduction in assaults on children (fewer children are maltreated); increased participation in early childhood education (ECE); increased infant immunisation and reduction in incidence of rheumatic fever Fewer children are in material hardship Children are resilient, experience positive parenting (supporting child development) and educational outcomes. 	<p>Integrated data infrastructure (IDI)¹¹: (MSD, Health, Police, IRD data, ECE data when available)</p> <p>Child and Youth Mortality Review Committee</p> <p>Youth 2000 Surveys</p> <p>Living Standards Survey</p> <p>Household Economic Survey</p> <p>B4School Checks</p> <p>Education – attainment, PISA data</p>
<p>Prevention</p> <p>Children are provided with the best start in life and are not maltreated.</p>	<ul style="list-style-type: none"> Children are resilient and their physical and mental development is supported/optimised Communities support families/whānau, and facilitate social networks Parents can compete in the labour market and material hardship and financial strain is reduced New Zealanders parent positively and use non-physical methods of discipline effectively. 	<p>NZ Health Survey</p> <p>General Social Survey</p> <p>Youth 2000 Surveys</p>

10. The sources of information identified here will not provide the complete set of data needed to measure progress for each of these areas. This will improve over time as we get better at collecting the right information, from providers and at the national level.

11. Aggregated information from the IDI will be used to inform progress towards achieving Government priorities.

<p>Early intervention</p> <p>Vulnerable children are identified early, health and learning issues are addressed and families/whānau are supported to meet their children's needs.</p>	<p>In addition to relevant factors identified above:</p> <ul style="list-style-type: none"> • Children and their families/whānau are linked to all services that they need • Parents who are struggling improve their parenting skills and knowledge, and can nurture and bond with their children • Parents' and caregivers' substance abuse issues are identified early and managed or reduced • Parents' financial stress is reduced • Children's/young peoples' mental health, learning and behavioural issues are identified early and managed/reduced. 	<p>IDI (Health data)</p> <p>General Social Survey</p>
<p>High-risk/intensive support</p> <p>High risk families/whānau are identified, monitored, and their problems managed or reduced.</p>	<p>In addition to relevant factors identified above:</p> <ul style="list-style-type: none"> • High-risk families/whānau are identified and linked to other appropriate services to address risk factors for maltreatment • Needs are monitored to ensure child safety • Persistent and complex needs are stabilised and addressed effectively • New Zealanders report suspected or observed maltreatment • Families/whānau are supported to resolve issues requiring emergency housing. 	<p>IDI (MSD, Police, Health, Education, Housing data)</p> <p>Vulnerable Kids Information System (when available)</p>
<p>Statutory intervention/crisis response</p> <p>Children/young people who have been maltreated are safe, recover and have good outcomes.</p>	<p>In addition to relevant high-risk factors identified above:</p> <ul style="list-style-type: none"> • Maltreated children/young people have safe and stable living arrangements • Maltreated children/young people are assisted to recover from the effects of maltreatment, and have health and education needs addressed • Children/young people pose no risk to themselves or others and have psychological/behavioural needs met • Young people leaving state care are appropriately supported and linked to services • Parents/caregivers who have maltreated children/young people in their care are supported and monitored appropriately, and their rates of re-abuse are minimised. 	<p>IDI (MSD, Health, Education data)</p> <p>Child and Youth Mortality Review Committee</p> <p>MSD (gateway assessments when available)</p> <p>Police</p>

What needs to happen to achieve the priority results	What we expect to see What Community Investment funded providers need to achieve	Information sources ¹⁰ National level outcome measures
Priority result area: Vulnerable young people, including young offenders, and reducing youth crime		
<p><i>Links with the Reducing Crime and Boosting Skills and Employment BPS targets and Youth Crime Action Plan.</i></p>	<p>High-level indicators of success:</p> <ul style="list-style-type: none"> • Reduction in rates of violent and youth crime; reduction in youth reoffending; increased proportion of 18-year-olds with NCEA level 2 or equivalent • More young people are in employment, education and training • Fewer young people misuse drugs and alcohol/have alcohol and drug addiction. 	<p>IDI (MSD, Police, Justice, Corrections, Education, IRD, Customs, Internal Affairs data)</p> <p>NZ Crime and Safety Survey</p> <p>Youth 2000 Surveys</p>
<p>Prevention</p> <p>Young people are supported, do not offend and their health and developmental needs are met.</p>	<ul style="list-style-type: none"> • Young people participate positively in their communities¹² • Young people are engaged with and achieve in education, employment or training • Young people have self-esteem, resilience and positive relationships with peers and adults. 	<p>Youth 2000 Surveys</p> <p>IDI (Education data)</p>
<p>Early intervention</p> <p>Young people with an elevated level of offending or violence are identified early, and their needs addressed.</p>	<p>In addition to the relevant factors identified above:</p> <ul style="list-style-type: none"> • Young people remain engaged with, and achieve, in school • At-risk young people develop problem solving skills and engage in positive activities • Young people reduce their use of drugs and alcohol. 	<p>Youth 2000 Surveys</p> <p>IDI (Education, Health data)</p> <p>NZ health survey</p> <p>Census</p>

12. Some of these factors are relevant to more than one result area, for example, young people leaving care being connected to necessary services is relevant to the vulnerable children and vulnerable young people result areas. For the purposes of brevity, these factors have not been repeated.

<p>High-risk/intensive support</p> <p>Young people at high risk of offending or violence are identified, monitored, held accountable for their behaviour and their needs addressed.</p>	<p>In addition to the relevant factors identified above:</p> <ul style="list-style-type: none"> • Young people exhibiting problem behaviour are identified, have their needs addressed and are supported to develop pro-social attitudes, values and behaviours • Young people with mental health and alcohol and other drug (AOD) issues are identified and referred to appropriate services to address their problems • Young people are safe, and pose no risk to themselves or others • Young people with conduct disorder, anti-social behaviour, and other behavioural problems are supported to manage and reduce their issues. 	<p>MSD (CYF)</p> <p>IDI (Health, Education, Police, Justice data)</p> <p>Child and Youth Mortality Review Committee</p>
<p>Statutory intervention/crisis response</p> <p>Young people who offend are held to account, and the causes of their offending are addressed.</p>	<p>In addition to the relevant high-risk factors identified above:</p> <ul style="list-style-type: none"> • Young people are held accountable for their offending, referred to services to address their needs, and victims' issues and interests are addressed • Young people on remand do not breach bail or reoffend • Young people are safe, and pose no risk to themselves or others, and have any mental health/drug and alcohol issues addressed. 	<p>MSD (CYF data)</p> <p>IDI (Justice, Police data)</p> <p>Child and Youth Mortality Review Committee</p>

What needs to happen to achieve the priority results	What we expect to see What Community Investment funded providers need to achieve	Information sources¹⁰ National level outcome measures
Priority result area: Vulnerable adult victims/survivors, addressing perpetrators' behaviour, and reducing violent crime (family violence ¹³ and sexual violence)		
<i>Links with the Reducing Crime BPS targets and Ministerial Family Violence and Sexual Violence Programme.</i>	High-level indicators of success: <ul style="list-style-type: none"> • Reduction in rates of violent crime; reduction in violent reoffending; fewer people are the victims/survivors of family violence and sexual violence; victims/survivors needs are addressed • Perpetrators are held to account for their behaviour and are supported to change • Fewer older people are abused and neglected. 	IDI (Police, Justice, Corrections, ACC data) NZ Crime and Safety Survey Police General Social Survey
Prevention Relationships between men, women and children are respectful and non-violent.	<ul style="list-style-type: none"> • Social norms in New Zealand support safe, healthy relationships, do not tolerate violence and support gender equality¹⁴ • Communities are mobilised to take a stand against family violence and sexual violence and support positive behaviour changes • New Zealanders understand elder abuse and neglect and its impacts, and older people are valued and protected • New Zealanders have equitable access to effective resources and support. 	General Social Survey New Zealand Longitudinal Study of Ageing (TBC)

13. Consistent with the definition used by the Family Violence Death Review Committee, family violence here refers to a broad range of controlling behaviours, commonly of a physical, sexual and/or psychological nature, which typically involve fear, intimidation and emotional deprivation. It occurs within a variety of close interpersonal relationships, such as between partners, parents and children, siblings and in other relationships where significant others are not part of the physical household but are part of the family and/or are fulfilling the function of family. Common forms include: violence among adult partners; abuse/neglect of children by an adult; abuse/neglect of older people aged approximately 65 years and over by a person with whom they have a relationship of trust; violence perpetrated by a child against their parent; and violence among siblings.

14. As part of the Ministerial Family Violence and Sexual Violence Programme, work is underway on an outcomes framework, which will further inform the Results Framework.

<p>Early intervention</p> <p>People with an elevated risk of family violence and/or sexual violence are identified and risk factors addressed.</p>	<p>In addition to the relevant factors identified above¹⁵:</p> <ul style="list-style-type: none"> • People at risk of family violence are identified early and issues addressed • People with risk factors associated with perpetrating sexual violence are identified and the risks reduced (for example, mental health problems, alcohol and other drug issues) • Conflict and/or coercive control within families/whānau is managed and reduced • New Zealanders intervene safely to help ensure families/whānau and individuals are free from violence. 	<p>NZ Crime and Safety</p> <p>Survey IDI (Police, Justice, Corrections, ACC data)</p>
<p>High-risk/intensive support</p> <p>People at high risk of family violence and/or sexual violence have their needs addressed.</p>	<p>In addition to the relevant factors identified above:</p> <ul style="list-style-type: none"> • Young people exhibiting harmful sexual behaviour are identified, have their needs addressed and are supported to develop pro-social attitudes, values and behaviours • High risk families/whānau are identified and conflict and/or coercive control within families/whānau is managed and reduced • Professionals are able to identify those at high risk of perpetrating family violence or sexual violence, as well as those being subjected to violence, and link them to appropriate services • Adults at high risk of perpetrating family violence or sexual violence are identified and risks reduced. 	<p>NZ Crime and Safety Survey</p> <p>IDI (Police, Justice, Corrections, ACC data)</p>
<p>Statutory intervention/crisis response</p> <p>Victims/survivors of family violence and/or sexual violence are safe and have their needs addressed; perpetrators of family violence and/or sexual violence are held accountable for their behaviour and end their use of violence.</p>	<p>In addition to the relevant high-risk factors identified above:</p> <ul style="list-style-type: none"> • Victims/survivors of family violence and sexual violence are safe • Victims/survivors of family violence and sexual violence are supported and empowered • Psychological impact and long-term harm of family violence and sexual violence is reduced • Perpetrators of family violence and sexual violence take responsibility for, and end, their use of violence and coercive control. 	<p>NZ Crime and Safety Survey</p> <p>IDI (ACC, Corrections data)</p>

15. This may also include other result area factors, for example, children/young people’s mental health, learning and behavioural issues are identified early, managed and/or reduced.

